

Promoting Healthy Behavior

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V(A). Planned Program (Summary)

1. Name of the Planned Program

Promoting Healthy Behavior

V(B). Program Knowledge Area(s)

1. Program Knowledge Areas and

KA Code	Knowledge Area	%1862 Extension	%1890 Extension	%1862 Research	%1890 Research
703	Nutrition Education and Behavior		50%		
724	Healthy Lifestyle		50%		
	Total		100%		

V(C). Planned Program (Inputs)

1. Actual amount of professional FTE/SYs expended this Program

Year: 2007	Extension		Research	
	1862	1890	1862	1890
Plan	0.0	4.0	0.0	0.0
Actual	0.0	3.0	0.0	0.0

2. Actual dollars expended in this Program (includes Carryover Funds from previous years)

Extension		Research	
Smith-Lever 3b & 3c	1890 Extension	Hatch	Evans-Allen
0	212389	0	0
1862 Matching	1890 Matching	1862 Matching	1890 Matching
0	223861	0	0
1862 All Other	1890 All Other	1862 All Other	1890 All Other
0	48015	0	0

V(D). Planned Program (Activity)**1. Brief description of the Activity**

Several health education activities focusing on nutrition and health were held in the form of workshops, seminars, and classes. These programs were held at schools, nutrition sites, assisted facilities, churches and community action centers.

A program targeting wellness, "A Healthy Weigh of Life," was implemented to teach youth and adults how to take control of their health by making healthy choices. The program consists of three components: Nutrition, Physical Activity, and Behavior Change. Each lesson was taught once a week for at least twelve weeks. Each session lasted approximately one (1) hour and provided an action plan for achieving and maintaining better health. Visual aids and food demonstrations were used to encourage participants to make healthy lifestyle changes. Exercise classes were offered twice a week to motivate adult participants to be more active while youth participated in daily physical education classes during school.

A New Leaf...Choices for Healthy Living allowed participants the opportunity to acquire knowledge of the importance of incorporating nutrition and physical activity into their lifestyle to have long-term impacts on families and ultimately on communities. This program targeted the reduction of risk factors such as high blood pressure, elevated blood glucose levels, and overweight/obesity associated with the chronic diseases, cardiovascular disease and diabetes. Twelve classes were taught in this area for one and one-half hours each week.

Programming specifically targeted toward increasing the number of African American males screened for prostate cancer was also conducted in the Black Belt counties.

In addition, the Macon County Senior Olympics provides senior citizens from Barbour, Bullock, Macon, Montgomery and Tallapoosa counties the opportunity to participate in a variety of physically challenging activities and games. Free health screenings are provided by nutrition and health professionals along with free health information and a healthy lunch is provided.

In West Alabama, programs were conducted on diabetes awareness, disease prevention and the health challenges facing young children in the school system. In recognition of Asthma Awareness, the entire month of May was allocated for the implementation of workshops, health fairs, and an Asthma Safari in collaboration with Sumter County Health Services. Several health education activities about nutrition and health were held in the form of workshops, seminars, and classes. These programs were held at schools, nutrition sites, assisted facilities, churches and community action centers.

2. Brief description of the target audience

Most of the targeted audiences were at risk youth and adults who were suffering from overweight, obesity, diabetes, hypertension and other chronic diseases. African American men ages 40 and older were targeted as well as minority women ages 18-64. Senior adults were also targeted.

V(E). Planned Program (Outputs)**1. Standard output measures**

Target for the number of persons (contacts) reached through direct and indirect contact methods

	Direct Contacts Adults	Indirect Contacts Adults	Direct Contacts Youth	Indirect Contacts Youth
Year	Target	Target	Target	Target
Plan	300	100	300	300
2007	1665	100	1340	75

2. Number of Patent Applications Submitted (Standard Research Output)**Patent Applications Submitted**

Year	Target
Plan:	0
2007:	0

Patents listed

3. Publications (Standard General Output Measure)**Number of Peer Reviewed Publications**

	Extension	Research	Total
Plan			
2007	0	0	0

V(F). State Defined Outputs**Output Target****Output #1****Output Measure**

- ? This ETP will follow Outcome Evaluation Methods by Green and Kreuter, 1991. This type of evaluation will provide data concerning short-term effects of the program, including increased awareness and knowledge, expressed intentions to make recommended changes, and responses to public service announcements. The measures can be self reported (interviews with the intended audience) evident changes in the number of people being screened for a cardiovascular (CVD) risk factor at a local health fair or a comparative study (comparing CVD knowledge of participating audience and of similar group that did not receive the intervention).

Year	Target	Actual
2007	25	25

Output #2**Output Measure**

- ? Team launched various prevention campaigns through health fairs, displays, workshops, seminars, mass media, and roadside billboards. Also food demonstrations, have participants keep food record; bi-weekly exercise class; weekly weigh-ins; support group/counseling.

Year	Target	Actual
2007	{No Data Entered}	3180

V(G). State Defined Outcomes

O No.	Outcome Name
1	The outcome is to decrease the risk of degenerative diseases, improve the quality of life, maintain reasonable weight by monitoring caloric consumption, control disease through diet, exercise, medication, and stress management.
2	Participants will acquire knowledge, skills and awareness regarding: Body Mass Index (BMI), setting nutrition goals, essentials of nutrition, importance of physical activity behavior modification, meal and menu planning, body weight, food intake, health and fitness.

Outcome #1**1. Outcome**

The outcome is to decrease the risk of degenerative diseases, improve the quality of life, maintain reasonable weight by monitoring caloric consumption, control disease through diet, exercise, medication, and stress management.

2. Associated Institution Types

- 1890 Extension

3a. Outcome Type:

Change in Knowledge Outcome Measure

3b. Quantitative Outcome

Year	Quantitative Target	Actual
2007	50	50

3c. Qualitative Outcome or Impact Statement**Issue (Who cares and Why)**

According to the Alabama Center for Health Statistics (2006), Alabama ranks number two (2) in obesity among other states in the United States. Obesity is a risk factor for several diseases including diabetes, heart disease and certain types of cancers. Macon, Bullock and Barbour Counties have very high rates of these diseases. For these reasons, health education classes and programs are needed in these counties to address these health disparities and improve the health of Alabamians.

What has been done

A wellness program, "A Healthy Weigh of Life" was implemented to teach adults how to take control of their health by making healthy choices. The health and wellness program consisted of three components: Nutrition, Exercise and Behavior Modification. Each lesson was taught once a week for at least one (1) hour and provided an action plan for participants to achieve various health goals (i.e. weight loss, lowering blood pressure, lowering cholesterol, controlling blood glucose levels and/or improving overall health). Visual aids and food demonstrations were used to promote healthy lifestyle changes. In addition, exercise classes were offered twice a week to motivate participants to be more active.

Results

As a result of the wellness programs, 95% of adult participants reported reading labels more and making healthier eating choices like consuming more reduced fat foods, whole grains and fiber rich foods. Food diaries showed participants making an increased effort to eat leaner meats, drink more water, and exercise more frequently. In addition to the 85% of participants that took part in exercise classes provided twice per week, over 50% of adult participants reported engaging in exercise at least three times a week at home or at a gym.

4. Associated Knowledge Areas

KA Code	Knowledge Area
724	Healthy Lifestyle
703	Nutrition Education and Behavior

Outcome #2**1. Outcome**

Participants will acquire knowledge, skills and awareness regarding: Body Mass Index (BMI), setting nutrition goals, essentials of nutrition, importance of physical activity behavior modification, meal and menu planning, body weight, food intake, health and fitness.

2. Associated Institution Types

- 1890 Extension

3a. Outcome Type:

Change in Knowledge Outcome Measure

3b. Quantitative Outcome

Year	Quantitative Target	Actual
2007	{No Data Entered}	641

3c. Qualitative Outcome or Impact Statement**Issue (Who cares and Why)**

According to the Alabama Center for Health Statistics, Alabama ranks number two (2) in obesity among other states in the United States. Additionally, one in four adults in Barbour County is obese (Alabama Center for Health Statistics, 2003) which could be avoided if health awareness and obesity prevention programs are implemented to school aged children. Obesity is a risk factor for several diseases including heart disease, diabetes and certain types of cancers. Macon, Bullock and Barbour Counties have very high rates of these diseases. For these reasons, health education classes and programs are needed in these counties to address these health disparities and improve the health of Alabamians.

What has been done

Admiral Moorer Middle School Healthy Kids program was implemented to 6th, 7th and 8th graders at the Admiral Moorer Middle School in Eufaula, Alabama. The goal of this program was to raise health awareness and teach youth the importance of making healthy choices at an early age to maintain health and prevent disease. The wellness program consisted of three (3) components: Nutrition, Exercise, and Behavior Modification. Visual aids and food demonstrations were used to promote healthy lifestyle changes. Pre-tests and post-tests, as well as food diaries, were used to evaluate changes in knowledge and behavior. There were two phases of the intervention, the first initial step was to determine the Body Mass Index (BMI) of each student and send an explanation of the results home to the parents along with a permission slip asking if the child could participate in the program. Once permission was granted, participants attended this program for one class period. For a total of twelve (12) weeks, classes were held during the physical activity or auxiliary period. Each lesson focused on a particular health topic, included a healthy snack break and provided an action plan for attaining and maintaining a healthy lifestyle. The health classes offered to the youth provided valuable health information about health conditions that are prevalent among their age group. Youth were taught how to make healthier vending machine choices and how to recognize foods with hidden fats. Food demonstrations gave participants healthy snack ideas and showed them how to prepare tasty, healthier snacks.

Results

As a result of the program, 57 youth participated in the twelve (12) week program and were observed drinking more water and choosing flavored water and diet soft drinks over regular ones. Based on the evaluation of food diaries, youth were shown to have significantly increased fruits and vegetables consumption. Post-test results showed that participants' knowledge had increased since the start of the program while group presentations done at the end of the program showcased specific health topics that participants became more knowledgeable of throughout the program. Moreover, due to our efforts, a total of 641 middle school students increased their knowledge of how to calculate his/her Body Mass Index (BMI), plot the results on a gender specific growth chart and became aware of their risk for overweight/obesity.

4. Associated Knowledge Areas

KA Code	Knowledge Area
724	Healthy Lifestyle
703	Nutrition Education and Behavior

V(H). Planned Program (External Factors)**External factors which affected outcomes**

? Economy

Brief Explanation

The economy was a factor in the expected outcomes of health and wellness programs. Increasing cost of fresh fruits, vegetables, dairy products and eggs caused many of the participants that were economically challenged from being able to afford these items. The excessive price of gasoline has also caused many individuals to shift priorities, choosing instead to purchase gasoline to travel to and from work rather than purchase higher priced food items.

V(I). Planned Program (Evaluation Studies and Data Collection)

1. Evaluation Studies Planned

? Before-After (before and after program)

Evaluation Results

As a result of health and wellness programs provided by TUCEP, 68 youth and over 400 adults were exposed to reliable nutrition and health information. While all participants experienced increased awareness of health issues, 41 adults and 57 youth experienced an increase in knowledge which was evaluated by pre/post tests and testimonials. Daily food logs, physical activity logs and testimonials also showed a change in action of participants.

Key Items of Evaluation

More comprehensive health-related programs are needed throughout the Black Belt counties, especially recreational facilities.

Many of the local grocery stores located throughout the Black Belt counties fail to carry adequate supplies of fresh fruits and vegetables at affordable prices.

Healthy food preparation continues to be a challenge due to lack of knowledge, skills, and access to healthy food choices.